

**● PRINTER RUSH ●**  
**(PTO ASSISTANCE)**

Application :	Examiner :	GAU :
10/06/05	Peikari	2186
From:	Location:	Date:
MR	(IDC) FMF FDC	05-10-05
Tracking #:		Week Date:
06097809		04/18/05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	03-17-05	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Original claim 37 now 36 depends upon  
cancelled claim 36. Improper Dependency.

Please correct claim dependency.

[XRUSH] RESPONSE:
<b>INITIALS:</b>

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.  
REV 10/04